

# Diseases of the Outdoors

## Enteric or Typhoid Fever

This is a disease which affects the intestines and causes a high fever and high temperature with diarrhoea, coughing, and a rash on the stomach. It is highly contagious and infectious, and the germs live in any dirt, manure, rubbish, etc, and are carried by flies, insects, people or food. Thanks to proper control the disease is becoming less common today, and with treatment it is rarely fatal.

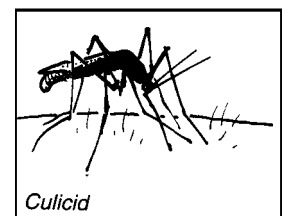
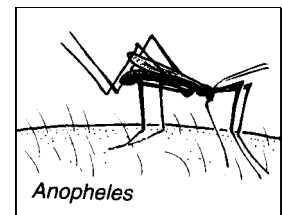
The natural home of the germs is the human body, and as they can live in food, water or dirt for any amount of time, they soon die off if they do not enter a person's body. Typhoid germs are passed out of the body either in the faecal matter or in urine. There are certain people who are themselves typhoid carriers but do not get it themselves. As soon as new cases are discovered, they and the people they come into contact with are isolated and treated. All their clothes and eating utensils are boiled so as to kill any germs.

To guard against typhoid fever all doubtful milk and water should be boiled; eating and cooking utensils should always be spotless; latrines should be covered and situated away from water supplies; care should be taken with washing hands after coming from the latrines.

## Malaria

This disease is found only in the tropics and in some parts of Mpumalanga and KwaZulu-Natal. It is caused by a parasite carried by the female Anopheles mosquito which breeds in stagnant water and damp areas. Only the female feeds on blood, and while sucking it from a human transmits germs into the blood. You cannot catch malaria in any other way.

Normally the female mosquito has fed on a person with malaria, the germs have developed inside the mosquito and should it bite anyone in the next couple of days the disease will be transmitted. The malaria parasite multiplies in the red blood cells and symptoms occur after 7-14 days. The symptoms are a high fever, feeling cold and shivering and then hot and sweating, a high temperature with headaches and vomiting, and they recur every 1-3 days.



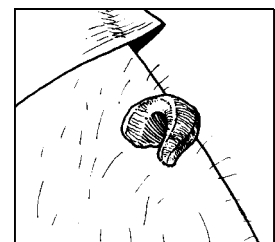
Untreated malaria is very serious with the risk of coma (cerebral malaria), kidney failure and even death. The disease can recur every year or so unless properly treated.

To prevent malaria, take a preventative drug such as chloroquine or mefloquine. It is important to find out first whether the malaria in the area is resistant to the drug you are taking. Other precautions include sleeping quite a distance from water and covering yourself with a net. Wear protective clothing at night and apply insect repellent to exposed areas.

## Leeches

Leeches are worms 3-18 cm in length which live in water and attach themselves to a plant or an animal host. They feed on sap or blood, and inject an anti-clotting agent to promote the flow of blood. The bite is painless and the victim usually first notices it due to a stream of blood running down the skin.

The leech can be made to let go by applying a lighted match to its tail. Bleeding can be stopped by direct pressure for several minutes, and it is advisable to apply an antiseptic ointment or mercurochrome afterwards.



## Bilharzia

Bilharzia or schistosomiasis is due to very small worms that live in water snail found in most parts of Southern Africa except the Western Cape. All slow moving rivers and stagnant water north of Knysna must be treated with suspicion.

The bilharzia worm, or schistosoma, after mating lays eggs which are carried into water by various means: e.g. sewage or rain water, and once they have hatched into larvae, they swim around in search of a water snail. They die after a day if a snail host cannot be found. If they find a snail host, they work their way into its liver where they multiply for anything up to six years.

During this time the snail liberates the larvae being produced in its liver back into the water. If a human drinks, swims or washes in this water, the larvae enter the body by working their way beneath the skin and cause a burning feeling. If a larva does not find a human host in two days, it dies. These larvae get into the bloodstream and go to the liver where they change into worms. They can also affect other organs in the body, but most go to the bladder or intestines and pass out of the body with the urine or faeces, with the accompaniment of blood. Blood in the urine or faeces is thus the first sign of bilharzia. Fortunately it can be effectively treated.

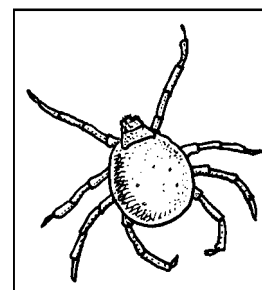
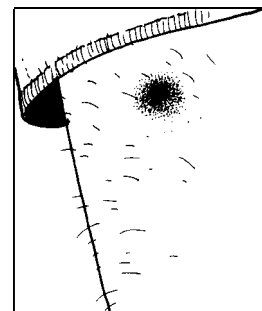
*Bilharzia occurs mainly in the Northern parts of South Africa, KwaZulu-Natal and the Eastern Cape. It is unwise to paddle or swim in rivers and dams in these areas.*

## Tickbite fever

Ticks are found in bushes and long grass. They attach themselves to the legs and bodies of passing animals and humans.

Tickbite fever develops one week after being bitten by a tick infected with organisms called rickettsia. The initial symptoms are fever, severe headache, and marked sensitivity to bright light. An ulcer with a hard black centre can be found on the skin at the site of the bite. Glands in the area may be swollen, and a reddish rash appears on the trunk and limbs. This rash is often prominent on the palms of the hands. Pneumonia and heart inflammation are possible complications.

The victim of tickbite fever should be kept at rest in subdued light. Codeine or paracetamol will provide some relief from headache. The condition responds rapidly to treatment with antibiotics.



## Mountain Sickness

Mountain sickness or altitude sickness occurs when a person normally resident at sea level ascends to a height of above 3000m. Normal body function only occurs at high altitude after a period of acclimatisation. Otherwise various symptoms occur including headaches, breathlessness, nausea, heart palpitations and a general feeling of heaviness. As the body gets used to the reduced levels of oxygen available at altitude, these symptoms gradually disappear.

At higher altitudes (5000m and above), more serious symptoms occur. Congestion of the lungs (high-altitude pulmonary oedema) causes extreme breathlessness, a dry hacking cough, chest pain and palpitations. Congestion of the brain (high-altitude cerebral oedema) causes very severe headache, vomiting, visual disturbance and staggering. Both conditions can be fatal and it is essential to get the victim to a lower altitude as quickly as possible.

Mountain sickness can be avoided by ascending gradually, by avoiding over-exertion for the first few days at new altitude, and by taking plenty of rest. Medicines like Diamox can help. If unpleasant symptoms last more than 3-4 days, descend to a lower altitude until they subside.